

04-14-05
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7590 01/21/2005
DELPHI TECHNOLOGIES, INC.
M/C 480-410-202
5825 DELPHI DRIVE
TROY, MI 48098-2815

EV 312957715 US

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| | |
|---------------------|--------------------|
| <i>Susan Grisha</i> | (Depositor's name) |
| <i>Susan Grisha</i> | (Signature) |
| <i>4-18-05</i> | (Date) |

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
|-----------------|-------------|----------------------|---------------------|------------------|

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|------------|------------|----------------|--------------------|------|
| 10/767,134 | 01/28/2004 | Jill N. Kantor | DP-309515 7500/254 | 4299 |
|------------|------------|----------------|--------------------|------|

TITLE OF INVENTION: VOLTAGE REGULATED TRANSISTOR DRIVER

04/20/2005 DEMANU2 00000028 500831 10767134

| | |
|------------|------------|
| 01 FC:1501 | 1400.00 DA |
| 02 FC:1504 | 300.00 DA |
| 03 FC:8001 | 6.00 DA |

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|----------------|--------------|-----------|-----------------|------------------|------------|
| nonprovisional | NO | \$1400 | \$300 | \$1700 | 04/21/2005 |

| EXAMINER | ART UNIT | CLASS-SUBCLASS |
|------------------------|----------|----------------|
| ZWEIZIG, JEFFERY SHAWN | 2816 | 327-536000 |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Michael D. Smith

2. _____

3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

DELPHI TECHNOLOGIES, INC.

TROY, MICHIGAN

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

4b. Payment of Fee(s):

- ☒ Issue Fee
- ☐ Publication Fee (No small entity discount permitted)
- ☒ Advance Order - # of Copies 2

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- ☒ The Director is hereby authorized to charge the required fee(s), or credit any overpayment Deposit Account Number 500831 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Susan Grisha

Typed or printed name Susan Grisha

Date 4-18-05

Registration No. _____

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